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SEC. OF STATE

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: AVON CLARION		2. DATE: 10-1-07
3. FREQUENCY OF ISSUE: WEEKLY	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $: 28.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): AVON CLARION, P.O. BOX 345, 103 N MAIN AVE SD 57315		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): SAME		
6. FULL NAME OF PUBLISHER: JACKSON S. BRODEEN		

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
JACKSON S. BRODEEN	SAME

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

NONE

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	900	900
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	24	49
2. Mail Subscription (Paid and or requested)	800	729
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	824	828
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	51	51
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	—	—
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	875	879
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	25	21
2. Return from News Agents	900	900
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)		

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

(Signature) (Title)

State of South Dakota)
§
County of Bon Homme)

(Seal)

Sworn to before me this 12th day of October, 2007

Carol D. Eggers
Notary Public

My commission expires: July 5, 2013

Form: SOS REC 051 7/2004